

## Kids Church Registration



### Parent/Guardian 1

Full Name: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Relationship to Child: \_\_\_\_\_

### Parent/Guardian 2

Full Name: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Relationship to Child: \_\_\_\_\_

### Address Information (primary residence of child)

Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Phone: \_\_\_\_\_

### Individual Kid's Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Birth date: \_\_\_\_\_  
Gender: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_  
Allergies/Anything we can do to make your child's experience more enjoyable: \_\_\_\_\_  
\_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Birth date: \_\_\_\_\_  
Gender: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_  
Allergies/Anything we can do to make your child's experience more enjoyable: \_\_\_\_\_  
\_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Birth date: \_\_\_\_\_  
Gender: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_  
Allergies/Anything we can do to make your child's experience more enjoyable: \_\_\_\_\_  
\_\_\_\_\_